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Borough of Marlborough



ANNUAL REPORTS
OF THE
MEDICAL OFFICER
OF HEALTH
AND
CHIEF PUBLIC HEALTH
INSPECTOR
FOR THE YEAR ENDED 1969

MEMBERS OF THE PUBLIC HEALTH COMMITTEE
(as at December, 1969)

Chairman: Councillor Capt. R. H. Maurice, D.S.O., D.S.C., RN.(retd.)

Vice-Chairman: Alderman Dr. T. K. Maurice, J.P.

Alderman Miss M. E. N. Pearce

Councillor A. G. Beauchamp

Councillor Major H. P..B. Hodgson

PUBLIC HEALTH DEPARTMENT OF THE AUTHORITY

Medical Officer of Health

F. D. F. Steede, M.B., B.Ch., D.P.H.

Chief Public Health Inspector

H. C. Yeoman, M.I.P.H.E., M.INST., M.R.S.H., M.A.P.H.I.

Additional Public Health Inspector

C. B. Blanchett, M.A.P.H.I.

(Resigned April, 1969)

M. J. Woodward, M.A.P.H.I.

(Commenced August, 1969)

Clerk (M.O.H.) Office

Miss G. M. Boswell

Clerk (Borough P.H.) Office

Mrs. V. Bishop

Public Health Department, Council Offices,
1 The Green, Marlborough.

Telephone Numbers:	Medical Officer of Health	Marlborough 2487
	Public Health Department	Marlborough 2474

The Medical Officer of Health acts in a similar capacity for the Rural Districts of Amesbury, Marlborough & Ramsbury, and Pewsey. These combined districts have a population of 73,590 and an area of 235,289 acres. They have appointed a Joint Committee, The East Wilts United Districts (Medical Officer of Health) Committee, to deal with all matters relating to the office of Medical Officer of Health. The Medical Officer of Health also performs duties for the Wiltshire County Council under the National Health Service, Education and Mental Health Acts.

BOROUGH OF MARLBOROUGH

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
for the Year 1969

Council Offices,
1 The Green,
Marlborough.

To The Mayor, Aldermen and Councillors:

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my annual report for the year 1969, which is compiled on similar lines as last year. I am grateful to Mr. Yeoman, the Chief Public Health Inspector for his report which is included. I am also indebted to Dr. Lycett, the County Medical Officer for supplying details of immunisation procedures carried out during the year, and to Mr. Hampshire, the Water Engineer, Borough of Swindon for supplying me with a summary of bacterial and chemical analysis.

Marlborough is situated on the river Kennet at an elevation approximately 470 feet above sea level, and although a small Borough, has an importance which is not related to its size.

Primarily a shopping centre, the town is also an important educational centre, as in addition to Marlborough College, there is the Grammar School dating from 1550, and also a Secondary Modern School, both now in new modern buildings in excellent surroundings. The livelihood of the population is provided in the main, by work in local trades and services, a little light industry, agricultural pursuits, and further afield the industrial town of Swindon. There is a flourishing catering industry to meet the needs of the many visitors to the town, which provides employment, much of it on a part-time and seasonal basis.

The town is very fortunate in having the Savernake hospital of 62 beds, within two miles of the centre, in pleasant surroundings. A hospital of this size and type not only provides a centre for consultant out-patient facilities, but also adequate in-patient surgical and medical services for 90 per cent at least of all hospital admissions. This is most important in view of the increasing difficulty in the provision of adequate public transport, especially for the more remote surrounding villages, and the real hardship this causes for those who are forced to rely on it, particularly the aged. In any case I firmly believe that where disease cannot be prevented it is best treated at home, and if this is not possible, as close to the home environment as possible. Not only is visiting made easier for relatives, but I am convinced that rehabilitation is often a less difficult undertaking. I understand that consideration is being given to the future provision of geriatric facilities at this hospital. I should very much like to see this implemented, particularly for those who after assessment are found to be incapable of discharge to their own homes, or to Part III accommodation, the lack of which is frequently the cause of old people having to be retained occupying a hospital bed unnecessarily.

This year the population estimate shows an increase of only 50, which is a little surprising in view of the fact that 33 new houses were completed, 27 by private enterprise.

The general health of the town is satisfactory. There has been an increase in the birth rate, which when adjusted is 2.8 above that for England and Wales. The number of illegitimate births has risen to 7 per cent, 4 per cent less than the all time high in 1967, compared with 8 per cent for England and Wales. There is no doubt that permissiveness and promiscuity are as closely related as horse racing and betting, or that promiscuity is an important factor in determining the illegitimate birth rate and the rising incidence of venereal disease. One wonders whether some of the influential enthusiasts for this controversial contemporary trend, fully realise the problems facing the teenage unmarried mother, and the "built in" handicaps for the average child of the unsupported mother, particularly where intelligence levels are low. Although a great deal is, and no doubt more could be done to ease these difficulties, it is hard to see how they can be entirely cancelled out in any organised society.

The number of deaths during the year has increased slightly, and at 71 with a death rate of 12.4 when adjusted, is slightly above that for England and Wales at 11.9. This year seven of the deaths, six in males, against none last year were due to cancer of the lung. This reflects more nearly the smoking habits of the population. I believe in presenting facts in attempting to educate people on health matters, even if this means repetition. It is probable that none of these premature deaths would have occurred if it were not for the cigarette smoking habit, which we know is primarily responsible, not only for the incidence of lung cancer in about nine cases out of ten, but for a large proportion of coronary heart disease, particularly in the young smoker, and also is an extremely important factor in chronic bronchitis, a major scourge in middle age.

As far as infectious diseases are concerned the year has been a very good one. For the second year dysentery has been minimal, only five cases being notified. One of these occurred in the Children's Convalescent Hospital, one was imported, and from these no further spread arose. The remaining three cases, two of which were related, were in children, but measures to prevent spread, particularly by the early imposition of the special routine hand-washing procedure in the schools concerned seem, in my view, to have been very effective. One case of a symptomless carrier of paratyphoid was discovered as a result of a letter from the Chief Medical Officer notifying the occurrence of an outbreak involving passengers on a "charter flight" to and from the Middle East, most of whom were on a "package" holiday. This caused considerable concern at the time, in view of the responsible position held by the person in question, the mother of a family in which there were two children of school age. Fortunately precautions taken were effective and again there was no dissemination of infection. In this case there was a history of vaccination with TAB vaccine (known to be less effective against paratyphoid than against typhoid). It has been my practice over the years to seek Press publicity for advice to overseas travellers in the early spring, especially to those contemplating a continental touring holiday, to avail themselves of vaccination with TAB in view of the fact that in an average year more than half the new cases notified are imported, and the numbers are increasing. Five cases of infective jaundice were notified. It is now standard practice to provide passive immunity in respect of family contacts, which some of us have been advocating for some years past. Vaccination against measles had unfortunately to be suspended for a time, due to the decision to withdraw the vaccine made by one of the two pharmaceutical firms concerned. There is little doubt that we have the means now in our hands to eliminate a disease which in spite of the fact that it is usually mild, sometimes gives rise to unpleasant complications, and in recent years has been the leading infectious disease as a cause of death.

Immunisation returns are satisfactory, and the County Health Department deserves a great deal of credit for this, due to its indefatigability in ensuring that all parents are notified when the various procedures are due, and to the

health visitors for their part in following up the back-sliders. It has been my practice to undertake the vaccination of Council staff and employees against influenza with the object of protecting the continuity of essential services, particularly those operated by outdoor staff, such as refuse collection, as they are liable to need a longer period of convalescence.

Housing conditions are reasonably good. Further headway has been made in modernising some of the older property, and future plans for increased housing development should help to reduce the number on the waiting list for Council accommodation. I am very glad that the Council introduced a points scheme during the year, which appears to be working well, and for which I have campaigned for some time.

There is no doubt that this town is well served both in the quality and the number of voluntary organisations working in the social field. The Council of Community Services which started some years ago as a result of the initial and continuing work of Mr. and Mrs. Spray of Littlefield, Marlborough College, where Mr. Spray is a House Master, has played an important part both as a focal point for new ideas and as a co-ordinating factor in the activities of other organisations, and has again this year published a very useful Directory of Community Services. The Meals on Wheels Service which supplies two meals a week, is cooked by voluntary workers in their own home. Grateful as we are for their devoted efforts, I wonder whether to cook as well as to distribute is not asking too much, and it may well be that if the meals are to be served on more than two days a week professional assistance with cooking will have to be found. The Luncheon Club operating one day a week has continued to be the unqualified success, which it has been since its inception - March, 1968. An interesting approach and very valuable one, in view of the importance of accidental hypothermia in old people, is a plan to supplement the heating of older council accommodation intended for the elderly, by the provision and maintenance of electric storage heaters through the initiative of the Marlborough Old Folk Association.

The water supply is now the responsibility of the Swindon Water Department and has given no cause for anxiety.

Another year has gone by without the implementation of the sewerage scheme designed to overcome major difficulties which are being experienced. These delays are entirely outside the jurisdiction of the Borough Council, and are not only causing serious difficulties in the Manton area, but are limiting future development as well, and inevitably the cost of the scheme spirals with each year that passes.

I am very grateful to the members of the Council for their continued support, and for the kindness and co-operation of all the officers of the Council in a year fraught with difficulties and uncertainty, in which the shadow cast by reorganisation has been a major factor. The future of Public Health is very much in the melting pot, and although some changes are desirable, I feel that we are in danger, in some respects, of "throwing out the baby with the bath water". I regret any dis-association in the relationship between the Medical Officer of Health and the Public Health Inspectorate. A view I believe shared by many of the rank and file, in view of its certain adverse effect on environmental health in its widest context at a time when "conservation" is a topic very much to the fore in the minds of many thinking people. The organisation of Public Health with a Medical Officer of Health exercising general direction over the work of the Public Health Inspectorate, a pattern adopted by many progressive countries, has contributed very largely to the position that, in the light of current knowledge, we are in this country at least, aware of our pollution problems, both nationally and

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locally, and have been able to find a satisfactory solution to many of them, in spite of difficulties posed either by their complexity, or the lack of necessary finance. Sometimes the reasons why actions to improve public health are not implemented are difficult to understand. Fluoridation is a case in point, since this well proven public health measure would reduce the appalling amount of dental caries by approximately 50 per cent in the rising generation, at trivial cost relative to the cost of dental disease, and with complete safety.

Finally I should specifically like to thank Mr. Yeoman and his staff, Dr. Lishman for acting as my Deputy, Dr. Wormald and the staff of the Public Health Laboratory for their continued help and frequent valued advice, and my secretary, Miss Boswell for her help and co-operation, particularly for her work in preparing this annual report.

I have the honour to be,

Your obedient servant,

F. D. F. STEEDE,
Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH

The elevation of the Borough is around 450 feet above sea level.

Area of the Borough in acres	1,496
Population, Registrar General's estimated mid-year	6,090
Number of inhabited houses and flats	1,807
Rateable value as at 1/4/69	£228,217
Value of penny rate as at 1/4/69	£860

Vital Statistics

	<u>M.</u>	<u>F.</u>	<u>Total</u>
Live births - Legitimate	42	37	79
Illegitimate	2	4	6
Totals	44	41	85
Live birth rate per 1,000 population			14.0
Illegitimate live births per cent of total live births.....			7.0
Stillbirths - Legitimate	-	-	-
Illegitimate	1	-	1
Totals	1	-	1
Stillbirth rate per 1,000 total live and stillbirths			12.0
Total live and stillbirths - Legitimate	42	37	79
Illegitimate	3	4	7
Totals	45	41	86
Deaths of all ages	39	32	71
Death rate per 1,000 population			11.7
Infant deaths under one year - Legitimate	-	2	2
Illegitimate	-	-	-
Totals	-	2	2
Infant mortality rate per 1,000 live births			24.0
Legitimate infant deaths per 1,000 legitimate live births...			25.0
Illegitimate infant deaths per 1,000 illegitimate live births			nil
Neo-natal deaths (under four weeks)			nil
Early neo-natal deaths (under one week)			nil
Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)			12.0
Maternal mortality (including abortion)			nil

	1965	1966	1967	1968	1969
Infant deaths	4	1	2	3	2
Infant mortality rate	55.6	10.9	25.0	45.0	24.0

CAUSES OF DEATHS, 1969

Cause of Death		M.	F.	Total
B6	Other tuberculosis including late effects	1	-	1
B19(4)	Malignant neoplasm, intestine	-	5	5
B19(6)	Malignant neoplasm, lung, bronchus	6	1	7
B19(7)	Malignant neoplasm, breast	-	1	1
B19(9)	Malignant neoplasm, prostate	1	-	1
B19(11)	Other malignant neoplasms	1	1	2
B21	Diabetes mellitus	-	2	2
B27	Hypertensive disease	1	2	3
B28	Ischaemic heart disease	6	2	8
B29	Other forms of heart disease	1	3	4
B30	Cerebrovascular disease	7	7	14
B46(5)	Other diseases of circulatory system	5	-	5
B31	Influenza	1	1	2
B32	Pneumonia	2	1	3
B33(1)	Bronchitis and emphysema	3	1	4
B39	Hyperplasia of prostate	1	-	1
B42	Congenital anomalies	1	4	5
B45	Symptoms and ill defined conditions	1	1	2
BE48	All other accidents	1	-	1
Total all causes		39	32	71

Comparison with England and Wales

	per 1,000 population		per 1,000 Live Births	per 1,000 Total Births
	Live Births (adjusted)	Death Rate (adjusted)	Infant Mortality	Stillbirths
Marlborough Borough	18.3	12.4	24.0	12.0
England and Wales	16.3	11.9	18.0	13.0

National Assistance Acts, 1948 section 47 and 1951

No action was taken under this legislation.

IMMUNISATION STATISTICS, 1969

Diphtheria, Whooping cough, Tetanus, Measles and Poliomyelitis Immunisation

Year of Birth		1969	1968	1967	1966	1965	1960-64	1954-59	Others under 16
Primary imms. completed during 1969	Diph.	40	25	1	2	-	51	-	-
	Wh/cough	40	25	-	-	-	-	-	-
	Tetanus	40	25	1	2	-	53	-	-
	Measles	-	7	21	15	2	6	-	-
	Polio.	40	25	-	1	-	5	1	-
Reinforcing imms. given in 1969	Diph.	-	11	32	1	1	17	-	-
	Wh/cough	-	10	21	-	-	6	-	-
	Tetanus	-	11	32	1	1	19	3	8
	Polio.	-	11	32	-	1	36	-	-

Smallpox Vaccinations

Age Group	months				years		
	0 -3	3 - 6	6 - 9	9 - 12	1	2 - 4	5 - 15
Vaccinations	-	-	-	-	16	13	-
Re-vaccinations	-	-	-	-	-	-	3

In this period a link main between Manton and Marlborough Common was laid, eliminating the need for the water tower which is being demolished. As a result the high level part of Marlborough in the vicinity of the Common is now supplied from the source at Clatford instead of Salisbury Hill.

CHEMICAL AND MINERAL EXAMINATION ANALYSIS OF FINAL WATER
(Parts per million)

Source	Date of Sample	Chlorides	Non Carbonate Hardness	Total Hardness	Nitrate Nitrogen	Nitrite Nitrogen	Ammoniacal Nitrogen	Albuminoid Nitrogen	Oxygen Absorbed	Natural Fluoride
Clatford	8 Jan.	10	40	250	4.7	absent	0.00	0.00	-	-
"	15 Jul.	10	35	245	4.8	absent	0.00	0.00	0.10	0.1
Marlborough	8 Jan.	9	30	250	3.6	absent	0.00	0.00	-	-
"	15 Jul.	9	25	245	3.5	absent	0.00	0.00	0.00	0.1

BACTERIOLOGICAL ANALYSIS

Source	Water	Total Samples Taken	Samples in which Coliforms were absent in 100 ml.	No.	%	Samples in which E.Coli Type 1 were absent in 100 ml.	No.	%
Clatford	raw	51	49	-	96	49	49	96
	final	50	50	-	100	50	50	100
Marlborough	raw	-	-	-	-	-	-	-
	final	50	50	-	100	50	50	100

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1969

Disease	Total Cases	Admitted to Hospital	Total Deaths	Analysis of Total Cases in age group											Age un-known	
				Under one Year	1 -	2 -	3 -	4 -	5 -9	10-14	15-24	25 -34	35 -44	45 -65		65+
Acute encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute meningitis	1	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-
Acute poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Anthrax	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cholera	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	5	-	-	-	-	-	-	-	3	1	-	-	-	-	-	-
Infective jaundice	5	-	-	-	1	-	-	-	-	2	-	1	-	-	-	-
Leprosy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leptospirosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	10	-	-	-	3	1	1	1	4	-	-	-	-	-	-	-
Ophthalmia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid fever	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Plague	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Relapsing fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tetanus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis, respiratory ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis, other	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Yellow fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	22	1	-	-	4	2	1	1	7	3	-	2	1	1	-	-

MARLBOROUGH BOROUGH COUNCIL

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR FOR THE YEAR 1969

Telephone: Marlborough 3296

Council Offices,
1 The Green,
Marlborough.

To the Mayor, Aldermen and Councillors.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my twenty first Annual Report on the work of the Public Health Department. The report covers the year ending 31st December, 1969, and is prepared in accordance with the Department of Health's circular dated 1st January, 1970.

Once again I have to report changes of staff. Mr. C. B. Blanchett who was appointed Additional Public Health Inspector in October, 1968 left on the 28th April, 1969. He was replaced by Mr. M. J. Woodward on the 18th August. Mr. Westcott the Technical Assistant engaged mainly on housing left on the 26th September, and his place was taken on the 10th November by Mr. N. P. Davies.

Yours faithfully,

H. C. YEOMAN
Chief Public Health Inspector.

February, 1970.

INSPECTION OF FOOD AND FOOD PREMISES

Food and Drugs Acts

The following premises are registered under section 16 of the Food & Drugs Act, 1955.

Sale of Ice Cream	27
Manufacture of Ice Cream	1
Manufacture and sale of sausages	4
Fish and chips	1

Food Premises

There are the following food premises within the Borough:-

Bakehouses	3
Butchers	4
Cafes and Restaurants (unlicensed)	5
Dairies	1
Delicatessens	1
Fishmongers	2
Fried Fish Shops	1
Greengrocers	4
Grocers and General Stores	23
Licensed premises serving meals	14
Sweets and sugar confectionery	6
School kitchens	6
Factory Canteens	6

Condemned Food

The following foods were surrendered to the Public Health Department during the year:-

Fresh Meat	27½ lbs.
Fresh Fish	5 lbs.
Tinned Fruit	57 lbs.
Miscellaneous Tins	34 lbs.
	<hr/>
	123½ lbs.

Meat Inspection

There are no slaughter houses in the district and the only meat inspected was in retail shops.

Food Hygiene General Regulations, 1960

Despite a period of over 3 months with no Additional P.H.I. a considerable amount of time has been spent on the routine inspection of food premises, and a total of 214 visits were made. The standard is commendably high and it is pleasing to report that no statutory action has been necessary.

Milk Supplies - Brucella Abortis

(i)	Number of samples of raw milk examined	1
(ii)	Number of positive samples found	Nil
(iii)	Action taken	-

Poultry Inspection

There are no poultry processing plants within the Borough.

Milk (Special Designation)
Regulations 1963

There are 8 licensed dealers in the district,
viz:

J. M. & H. Paulsen, Merlin Rest.	Pasteurised.
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Church Farm Dairy (Marlborough) Ltd.	Pasteurised, Sterilised U.H.T. Untreated
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Mace Marketing	Pasteurised Sterilised U.H.T.
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L.S. Wade, 77 High St.	Pasteurised Sterilised U.H.T.
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Swindon & District Co-operative	Pasteurised Sterilised U.H.T.
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J. P. O'Keefe, 12 The Parade	Pasteurised
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Stratton Sons & Mead	Pasteurised
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A. J. Baden, 18 St. Martins	Pasteurised
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All premises have been inspected regularly
and a total of 38 visits made. 45 samples were
taken and all proved satisfactory.

MOVEABLE DWELLINGS

There is only 1 licensed site within the Borough. The 2 caravans are well
maintained.

GYPSIES

In March 6 caravans appeared at 2 separate locations on the Common, support-
ing a population of some 30 persons. Although there was no serious public health
risk, the sites quickly became most undesirable and on the instructions of the
Council they were moved on. The sites were cleaned up, and the problem has
not recurred.

PUBLIC CLEANSING

A weekly collection is maintained in all parts of the district and in addition cafes,
restaurants etc., have a twice weekly collection. Disposal by incineration and
controlled tipping at Portfields continues to be satisfactory and infestation by
rats and flies has been minimal.

HOUSING

Council Housing

A contract for 12 houses in Blowhorn Street was commenced in June, and at the end of the year two 3 bedroom and four 2 bedroom houses had been completed.

The Modernization programme of pre-war houses was delayed by staff problems but by the end of the year a total of 45 houses were completed and work on 8 more well advanced.

Private Housing

27 houses were completed during the year, to give a total of 375 houses since 1945. At the end of December a further 50 were under construction.

Improvement Grants

Very few applications were received during the year, probably due to the new legislation which had been promised for some time and which eventually became law in July. The following applications were approved during the year:

2 Discretionary Grants - value £1,230.

3 Standard Grants - value £370

PETROLEUM (REGULATIONS) ACTS 1928 and 1936

There are 22 licensed premises within the Borough all of which have been inspected at least once.

RODENT CONTROL

94 complaints of rodent infestation were received during the year, 23 of which came from business premises. In addition a test baiting of 26 manholes on the main sewerage system was carried out but no infestations were found. The work of rodent control is carried out by a member of the outside staff under the direct supervision of the Public Health Inspector.

SEWERAGE

Very little progress has been made with the scheme for improvements to the sewerage system. Difficulties have arisen over the acquisition of land for a pumping station but at the end of the year alternative sites were being investigated.

The works, in the meantime, continue to operate as satisfactorily as possible but at times the effluent fails to reach the standard laid down by the Thames Conservancy.

FACTORIES

27 inspections were carried out during the year, and details are set out in the appendix to the report.

WATER SUPPLY

The water undertaking for the district is Swindon Corporation. 2 bacteriological samples were taken during the year, both of which were satisfactory.

SWIMMING BATH

The bath was open from 19th April to 13th September, and with fine weather for most of the season was used more than ever before. The heating plant worked perfectly, and the filtration and chlorination plant also functioned satisfactorily. 4 bacteriological samples were taken and all proved perfect.

OFFICES, SHOPS & RAILWAY PREMISES ACT, 1963

Little progress was made in the detailed inspection of registered premises, but routine complaints were investigated. One accident was reported and inspection made of the premises concerned.

FACTORIES ACT 1961

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1969 FOR THE BOROUGH OF MARLBOROUGH IN THE COUNTY OF WILTSHIRE:

Prescribed Particulars on the Administration of the Factories Act, 1961

PART 1 OF THE ACT

1 - INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	4	7	-	-
(ii) Factories not included in (i) in which section 7 is enforced by the Local Authority	47	17	-	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)	3	3	-	-
Total	54	27	-	-

2 - Cases in which DEFECTS were found (If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of Cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable Temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	By H.M. Inspector (5)	
Ineffective drainage of floors (S6) _____	-	-	-	-	-
Sanitary Conveniences (S7)					
(a) Insufficient _____	-	-	-	-	-
(b) Unsuitable or defective _____	-	-	-	-	-
(c) Not separate for sexes _____	-	-	-	-	-
Other offences against the Act (not including offences relating to Out-work) _____	-	-	-	-	-
Total	-	-	-	-	-

PART VIII OF THE ACT (Sections 133 and 134)

reference Outworkers -

1. (Glove-making)

